

PRINT DATE



U.S. Customs and Border Protection

6650 Telecom Drive
Indianapolis, IN 46278

For Bill inquiries, please contact the Revenue Division at (317) 614-4811 or billinginquiry@cbp.dhs.gov.

For Entry inquiries, please contact the relevant Center at <https://www.cbp.gov/trade/centers-excellence-and-expertise-information/cee-directory>.

BILL TO:

Debtor Number:

Bill Number:

Bill Date:

Port of Service/Charge:

Center ID:

Team Number:

Dear Sir or Madam:

This Bill is a notice of debt currently owed to U.S. Customs and Border Protection (CBP) and is produced pursuant to 19 Code of Federal Regulations (CFR) 24.3a(d). CBP bills for supplemental duties (increased or additional duties, taxes, and fees assessed upon the liquidation or re-liquidation of an entry) together with interest, reimbursable services, and miscellaneous amounts. The Code of Federal Regulations (19 CFR § 24.1(a)(2)) requires your remittance to be payable in United States dollars and drawn on a United States bank.

Transaction Date	Transaction Identification (i.e., Entry No./Work Ticket No.)	Reference Name	Type of Charge	Amount
The entire billing information is available online in your ACE Portal account Reports tool at https://ace.cbp.dhs.gov .				
Interest Accrued to Date				
Full Amount Due Upon Receipt				
Amount Due After _____ including interest)				

Note: Failure to make payment or provide legal justification of non-payment may result in suspension of immediate release privileges in accordance with 19 CFR § 142.26.

Sanction Status: _____

Surety Code _____

Interest Rate Effective _____

For more information visit www.cbp.gov/trade/priority-issues/revenue

CBP Bill Form (10/2021)

PAYER'S COPY

Enclose this portion with remittance

PRINT DATE |

BILL TO:

Bill Number: _____

Amount Enclosed: _____

U.S. Customs and Border Protection
P.O. Box 979126
St. Louis, MO 63197-9000

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